Pollution Prevention [P2]

and

Pharmaceuticals in the Healthcare Industry

for

New Mexico Healthcare Pollution Prevention Advisory Council

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[PWD/WWU/p2 Program]

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Objectives

4 Identify the "drivers"

4 Overview

- Persistent Bioaccumulative and Toxic [PBT]
- 4 P2 & pharmaceuticals in healthcare:
 - Benefits
 - Opportunities
- 4 Review strategies for "success"

The "Drivers"

4 Regulatory

Federal / State / Local

4 Corporate

Vision-Mission / economic / PR / insurance / liability

4 Industry

 Standards / guidelines / agreements / accreditation / community outreach

4 Community

The public / interested parties

Persistent, Bioaccumulative, and Toxic [PBT] What is a PBT Chemical?

4 Pollutant chemicals that **persist** in the environment, are **toxic**, and **bioaccumulate** in food chains, posing risks to global ecosystems and human health; a.k.a. Persistent Organic Pollutants, POPs.

PBTs and the healthcare industry

4 Present:

mercury

4 Future???:

- EPA target FY2003: endocrine disruptors
- pharmaceuticals as contaminants in waterways: antibiotics, hormones, analgesics, anti-inflammatory....
- low-level exposures resulting in harmful effects on aquatic species

P2 Benefits: the business advantage

- 4 P2 practices reduce or eliminate:
 - \$\$\frac{1}{2}\costs}\$ of waste handling, treatment, storage, disposal, and associated labor
 - civil and criminal fines
 - permit fees
 - insurance costs
- 4 Reduce regulatory burden
- 4 Decrease liability
- 4 Enhance public image
- 4 Effect of a positive corporate culture on staff

P2 Source Reduction Opportunities

- 4 Environmental [full-cost] accounting practices
- 4 Purchasing
- 4 Inventory control
- 4 Tracking of waste
- 4 Continuous improvement audits
- 4 Environmental training for all
- 4 Employee participation/suggestion programs

Source Reduction: environmental accounting

- 4 Actual cost of pharmaceutical = "unit" price of a pharmaceutical + costs associated with:
 - storage of the product
 - handling of returns [\$ in time/administrative/shipping]
 - management of hazardous waste:
 - storage of wastes
 - transport of waste
 - disposal fees
 - labor of staff
 - training of staff
 - regulatory requirements
 - insurance

Source Reduction: purchasing/inventory control

- 4 Purchasing decisions incorporate environmental accounting principles
- 4 Purchasing system electronically connected to chemical management system allows for id of products [and RCRA waste codes where applicable?]
- 4 Centralized purchasing aids in a standardized inventory [reducing surprises on the waste end of the system]
- 4 Avoid standing re-orders [that may create storage issues and result in handling of returns]
- 4 JIT [reduce obsolete items and product storage needs]
- 4 Real-time inventory control [facilitated by barcodes]

Beyond Source Reduction in P2: Waste minimization

- 4 Training, training, training, and QA/QC at all program/ staff levels reduces potential for waste
- 4 Determination of status: material or waste? [RCRA]
 - Work closely with purchasing organization or reverse distribution company in returning non-dispensable pharmaceuticals to the manufacturers
 - Reverse distribution company may provide waste disposal service in addition to returns
- 4 Accurate characterization of waste [RCRA?]

Beyond Source Reduction in P2: Waste minimization

[continued]

- 4 Segregation of waste
 - RCRA + compatibility + ultimate waste disposal method
- 4 Waste containers: accessible / labeled / dated / inventoried
- 4 Assignment of responsibility for compliance
- 4 Methods that reduce potential for waste: OPs, vented enclosures, housekeeping
- 4 Cleanup Procedures that reduce volume of cleanup materials
- 4 Establish cooperative relationships with regulators

Waste minimization method: Reverse Distribution

4 Never intended to be a waste management tool

 Return non-dispensable product to manufacturers [expired, obsolete, and recalled products, and unused preparations]

4 Understand the level of service available

- Returns and/or actual waste management, i.e. can they service both, very different needs?
- Assist in waste characterization & training of staff?
- Capital Returns, Inc. Evaluation Criteria: www.capitalreturns.com/EvalCriteria.htm

4 Off-site vs. on-site service

- Which company takes on the role of waste generator?
- Off-site service takes responsibility for determination, characterization, and disposal of waste products not returned to the manufacturer

4 References from other client companies

Occupational Safety and Health Administration Controlling Occupational Exposure to Hazardous Drugs OSHA Technical Manual, Section VI, Chapter2

- 4 OSHA guidance document based on American Society of Health-System Pharmacists class of agents identified as "hazardous drugs"
- 4 Hazardous Drug Safety and Health Plan program elements:
 - Operating procedures
 - Criteria for exposure control measures
 - Hazard Communication program per 1910.1200
 - Medical exams/surveillance of potentially exposed staff
 - Record keeping: exposure and biological monitoring; medical; training 1910.1020
 - Designate responsibility for implementation of the Plan

What constitutes a <u>pharmaceutical</u> waste?

- 4 The following represent waste pharmaceuticals:
 - IV preparations [biohazardous if contaminated]
 - compounding
 - spills
 - partially used vials/syringes [biohazardous if contaminated]
- 4 EPA considers the following <u>products</u> until a decision is made to <u>discard</u> the material, at which time, it becomes a <u>waste</u>:
 - outdated
 - discontinued/obsolete
 - unused repacks
 - returns from patient rooms
- 4 Identification of sources of waste helps with <u>source</u> reduction and waste minimization

Hazardous wastes: RCRA-regulated

"The Devil is in the details"

4 Waste categories per 40 CFR Part 261:

- Characteristic: ignitability, corrosivity, reactivity, toxicity
- "Listed": commercial chemical products found in "P" [acute hazardous waste] and "U" [non-acute] listings
- Category may apply to containers with residue, personal protective equipment and spill cleanup materials that have contacted waste

Hazardous wastes: RCRA-regulated

[continued]

- 4 "Cradle to grave" responsibility/liability
- 4 Accumulation
- 4 Storage
- 4 Inspections
- 4 Transportation of waste: packaging/labeling/manifests/contractor
 - 4 Treatment, storage & disposal of waste: licensed facility
 - 4 Staff Training
 - 4 Haz waste program: contingency/emergency/prevention
 - 4 Record keeping/reporting

Hazardous wastes: RCRA-regulated

EPA Generator Status?

4 Small Quantity Generator (SQG)

 generate no more than 100 to 1000 kg/month (220-2,220 lbs)

4 Conditionally Exempt Small Quantity Generator (CESQG)

generate no more than 100 k/month (220 lbs)

Every facility wants to be a CESQG!

Review strategies for "Success"

Define "success": sustainability ... economics ... community relationships ...

- 4 Integrate pollution prevention into business fabric
- 4 Network with local facilities [avoid re-invention]
- 4 <u>Develop</u> relationships with manufacturers, GPO's, regulators, chemical services contractors
- 4 Train all staff [this is a team effort]
- 4 <u>Inform</u> the community of facility's stewardship position

Resources: Websites

- 4 EPA
 - Pollution Prevention: www.epa.gov.p2
 - Persistent, Bioaccumulative, Toxic Program: www.epa.gov/pbt
 - RCRA training modules: www.epa.gov/epaoswer/hotline
 - RCRA search: www.epa.gov/rcraonline
- 4 Hospitals for a Healthy Environment
 - www.h2e-online.org
- 4 OSHA Technical Links: Hazardous Drugs
 - www.osha.gov/SLTC/hazardousdrugs/index.html

Resources: Organizations

4 EPA

- RCRA Hotline: 1.800.424.9346
- Region VI: 1.214.665.6444
- Chemical Registry System: www.epa.gov/crs/index.htm
- 4 New Mexico Environment Department
 - Expert Referral Services: 1.800.219.6157, x2831
- 4 Your Facility's Contractors
 - Reverse Distribution
 - Chemical Services / Hazardous Waste Management
- 4 NM-OSHA Consultation: 505.827.4230
- 4 H2E Environmental Leadership Council
 - Catherine Zimmer, 612.624.4635

Resources: articles / reports / proceedings

- 4 Pollution Prevention Workshop for Medical Facilities. City of Albuquerque, Public Works Department, Wastewater Utility Division, Pollution Prevention Program. 4/2001.
- 4 Healthy Hospitals: Environmental Improvements Through Environmental Accounting. Tellus Institute. 7/2000.
- 4 Bad Medicine, Managing Drug Waste Liabilities. Charlotte Smith. Health Facilities Management. 1/2001.
- 4 Hormone disruptors: A clue to understanding the environmental causes of disease. Sheldon Krimsky. *Environment*. 6/2001.
- 4 Pharmaceuticals, hormones, and other organic wastewater contaminants in U.S. Streams, 1999-2000: A National reconnaissance. Dana Kolpin, et al. *Environmental Science and Technology*, 36 [6], 2002.